

MANWARING, ROBERT (id # [REDACTED], dob: [REDACTED]) **Redacted!**

AMITA HEALTH

NEUROSCIENCE
INSTITUTE

Date: 05/20/2019
Manwaring, Robert
[REDACTED]

[REDACTED]
111 Brookhill Rd
Libertyville, IL 60048

To Whom It May Concern:

This letter is to inform you that the above named individual has been assessed in our clinic. Mr. MANWARING presently has a progressive neurodegenerative disease. Due to the severity of his cognitive impairment, it is our professional opinion that he is not competent to make informed decisions for himself related to medical or financial matters. At this time, it would be preferred that his power of attorney acts in his best interest for safety and therapeutic reasons.

Should you have any questions, please contact us at 847-981-3630. With the proper release, we can share information with you as needed. We would appreciate your thoughtful consideration in this matter.

Sincerely yours,

Electronically Signed by: C. FORCHETTI, MD



C. FORCHETTI, MD

**NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS
STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY**

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial affairs, which may include the power to pledge, sell, or dispose of any of your real or personal property, even without your consent or any advance notice to you. When using the Statutory Short Form, you may name successor agents, but you may not name co-agents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you. It is also important to select an agent whom you trust, since you are giving that agent control over your financial assets and property. Any agent who does act for you has a duty to act in good faith for your benefit and to use due care, competence, and diligence. He or she must also act in accordance with the law and with the directions in this form. Your agent must keep a record of all receipts, disbursements, and significant actions taken as your agent.

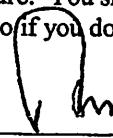
Unless you specifically limit the period of time that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, both before and after you become incapacitated. A court, however, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in Illinois.

The powers you give your agent are explained more fully in Section 3-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please place your initials on the following line indicating that you have read this Notice:



Principal's initials

**ILLINOIS STATUTORY SHORT FORM
POWER OF ATTORNEY FOR PROPERTY**

1. I, ROBERT T. MANWARING, 111 Brookhill Road, Libertyville, IL 60048, hereby revoke all prior powers of attorney for property executed by me and appoint: SHEILA M. MANWARING, my wife, 111 Brookhill Road, Libertyville, IL 60048, as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with respect to the following powers, as defined in Section 3-4 of the "Statutory Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

(NOTE: YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

- | | |
|--|--|
| (a) Real Estate transactions
(b) Financial institution transactions
(c) Stock and bond transactions
(d) Tangible personal property transactions
(e) Safe deposit box transactions
(f) Insurance and annuity transactions
(g) Retirement plan transactions
(h) Social Security, employment and military service benefits | (i) Tax matters
(j) Claims and litigation
(k) Commodity and option transactions
(l) Business operations
(m) Borrowing transactions
(n) Estate transactions
(o) All other property transactions |
|--|--|

(NOTE: LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:

(NOTE: HERE YOU MAY INCLUDE ANY SPECIFIC LIMITATIONS YOU DEEM APPROPRIATE, SUCH AS A PROHIBITION OR CONDITIONS ON THE SALE OF PARTICULAR STOCK OR REAL ESTATE OR SPECIAL RULES ON BORROWING BY THE AGENT.)

3. In addition to the powers granted above, I grant my agent the following powers:

(NOTE: HERE YOU MAY ADD ANY OTHER DELEGABLE POWERS INCLUDING, WITHOUT LIMITATION, POWER TO MAKE GIFTS, EXERCISE POWERS OF APPOINTMENT, NAME OR CHANGE BENEFICIARIES OR JOINT TENANTS OR REVOKE OR AMEND ANY TRUST SPECIFICALLY REFERRED TO BELOW.)

(NOTE: YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP PARAGRAPH 4, OTHERWISE IT SHOULD BE STRUCK OUT.)

4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.

(NOTE: YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT PARAGRAPH 5 IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(NOTE: THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH, UNLESS A LIMITATION ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALIZING AND COMPLETING ONE OR BOTH OF PARAGRAPHS 6 AND 7.)

6. This power of attorney shall become effective on _____ signing.

(NOTE: INSERT A FUTURE DATE OR EVENT DURING YOUR LIFETIME, SUCH AS A COURT DETERMINATION OF YOUR DISABILITY OR A WRITTEN DETERMINATION BY YOUR PHYSICIAN THAT YOU ARE INCAPACITATED, WHEN YOU WANT THIS POWER TO FIRST TAKE EFFECT.)

7. This power of attorney shall terminate on _____

(NOTE: INSERT A FUTURE DATE OR EVENT, SUCH AS A COURT DETERMINATION THAT YOU ARE NOT UNDER A LEGAL DISABILITY OR A WRITTEN DETERMINATION BY YOUR PHYSICIAN THAT YOU ARE NOT INCAPACITATED, IF YOU WANT THIS POWER TO TERMINATE PRIOR TO YOUR DEATH.)

(NOTE: IF YOU WISH TO NAME ONE OR MORE SUCCESSOR AGENTS, INSERT THE NAME AND ADDRESS OF EACH SUCCESSOR AGENT IN PARAGRAPH 8.)

8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

SARAH HAFFEY, my daughter, 1433 Woodbury Circle, Gurnee, IL 60031

RICK HAFFEY, my son-in-law, 1433 Woodbury Circle, Gurnee, IL 60031

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

(NOTE: IF YOU WISH TO, YOU MAY NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE IF A COURT DECIDES THAT ONE SHOULD BE APPOINTED. TO DO THIS, RETAIN PARAGRAPH 9, AND THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT THIS APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

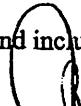
9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

10. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent.

(NOTE: THIS FORM DOES NOT AUTHORIZE YOUR AGENT TO APPEAR IN COURT FOR YOU AS AN ATTORNEY-AT-LAW OR OTHERWISE TO ENGAGE IN THE PRACTICE OF LAW UNLESS HE OR SHE IS A LICENSED ATTORNEY WHO IS AUTHORIZED TO PRACTICE LAW IN ILLINOIS.)

11. The Notice to Agent is incorporated by reference and included as part of this form.

Dated: June 23, 2015

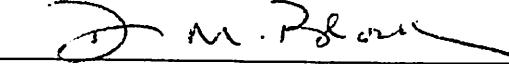
Signed: 

Robert T. Manwaring (Principal)

(NOTE: THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS SIGNED BY AT LEAST ONE WITNESS AND YOUR SIGNATURE IS NOTARIZED, USING THE FORM BELOW. THE NOTARY MAY NOT ALSO SIGN AS A WITNESS.)

The undersigned witness certifies that **ROBERT T. MANWARING**, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certifies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

Dated: June 23, 2015


Witness

STATE OF ILLINOIS)
)
) SS:
COUNTY OF LAKE)

The undersigned, a notary public in and for the above county and state, certifies that **ROBERT T. MANWARING**, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the witness Diane M. Block in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (and certified to the correctness of the signature(s) of the agent(s)).

Dated: June 23, 2015

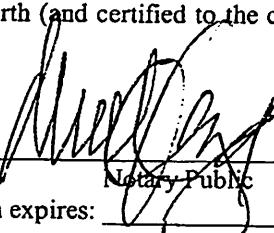

Notary Public
My commission expires: _____

EXHIBIT C

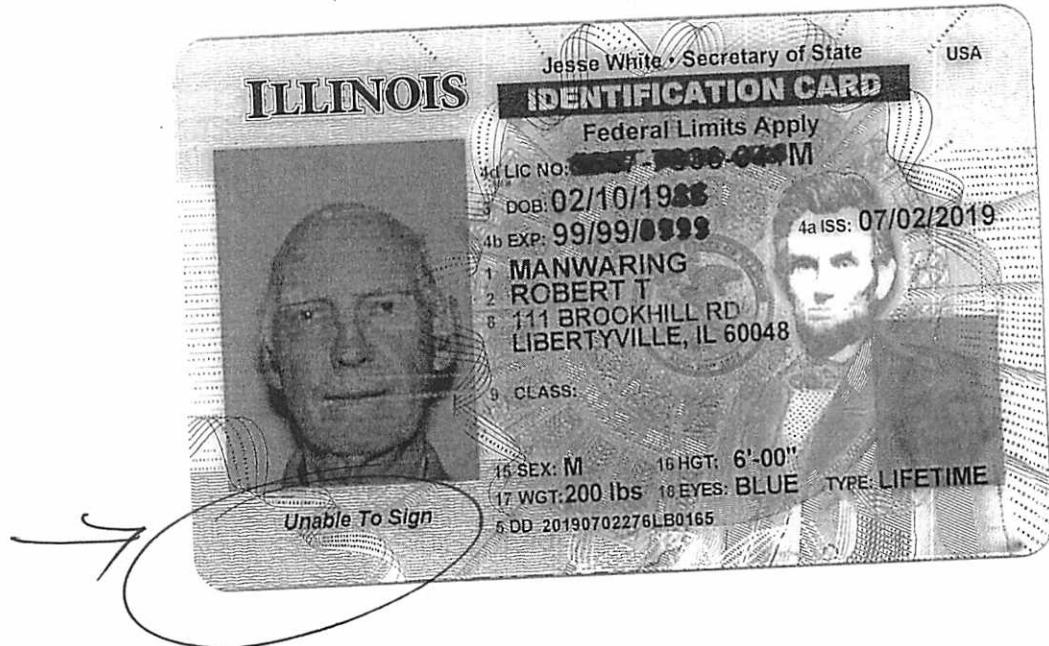


EXHIBIT D

FILED

8/7/2019 9:34 AM

ERIN CARTWRIGHT WEINSTEIN
Clerk of the Circuit Court
Lake County, Illinois

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
WAUKEGAN, LAKE COUNTY, ILLINOIS

JPMORGAN CHASE BANK, NATIONAL ASSOCIATION,

Plaintiff,

vs.

ROBERT TERENCE MANWARING AKA ROBERT MANWARING
AKA ROBERT T. MANWARING, SHEILA MABEL MANWARING AKA
SHEILA MANWARING AKA SHEILA M. MANWARING and TCF
NATIONAL BANK,

Defendants.

CASE NO. 15-CH-2133

PROPERTY ADDRESS:
111 BROOKHILL RD.
LIBERTYVILLE, IL 60048

MOTION FOR CONFIRMATION OF SALE AND PERSONAL DEFICIENCY JUDGMENT

Now comes the Plaintiff, JPMorgan Chase Bank, National Association, by its attorneys, Heavner, Beyers & Mihlar, LLC, and moves for an order confirming the Foreclosure sale conducted herein and as grounds therefore states:

1. Said sale was properly conducted.
2. The terms of said sale were fair and reasonable.
3. A copy of the Report of Sale is attached hereto as Exhibit A.
4. The Plaintiff further requests a personal deficiency in the amount of \$63,392.56 be entered against Robert Terence Manwaring aka Robert Manwaring aka Robert T. Manwaring and Sheila Mabel Manwaring aka Sheila Manwaring aka Sheila M. Manwaring, in favor of the Plaintiff, JPMorgan Chase Bank, National Association, should one result following the Foreclosure Sale of the subject property.

WHEREFORE, the plaintiff prays that this Court grant its Motion to confirm the foreclosure sale previously held in this cause and for entry of a personal deficiency judgment.

JPMORGAN CHASE BANK, NATIONAL ASSOCIATION,
Plaintiff,

Dated

8/7/19

By

Faiq Mihlar (#6274089), Its Attorney
Of Heavner, Beyers & Mihlar, LLC

Faiq Mihlar (#6274089)
HEAVNER, BEYERS & MIHLAR, LLC
Attorneys at Law
P.O. Box 740
Decatur, IL 62525

Send Notice/Pleadings to:
Veronika L. Jones (#6313161)
Email: Non-CookPleadings@hsbattys.com
Telephone: (217) 422-1719
Facsimile: (217) 422-1754



tabbed

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
WAUKEGAN, LAKE COUNTY, ILLINOIS

JPMORGAN CHASE BANK, NATIONAL ASSOCIATION,

Plaintiff,

vs.

ROBERT TERENCE MANWARING AKA ROBERT
MANWARING AKA ROBERT T. MANWARING, SHEILA
MABEL MANWARING AKA SHEILA MANWARING AKA
SHEILA M. MANWARING and TCF NATIONAL BANK,

Defendants.

CASE NO. 15-CH-2133

PROPERTY ADDRESS:
111 BROOKHILL RD.
LIBERTYVILLE, IL 60048

REPORT OF SALE AND DISTRIBUTION

I, Sheriff of Lake County, do hereby report:

That pursuant to a Judgment of Foreclosure and Sale entered herein, the Plaintiff advertised the following described real estate to be sold at public auction to the highest bidder for cash at 9:30 AM on August 6, 2019 at the Lake County Courthouse, 18 N. County St., RM# 01110, Waukegan, IL 60085, as set forth in the certificate of publication attached hereto and made a part hereof;

I first offered said real estate for sale separately, and then in combination less than the whole, and having received no bid therefore, I thereupon offered the entire real estate and premises hereinafter described en masse to the highest bidder on the terms specified in said advertisement;

That the Plaintiff, JPMorgan Chase Bank, National Association, offered and bid therefore the sum of Three Hundred Fifteen Thousand Dollars and Zero Cents (\$315,000.00) and that being the highest and best bid, I accordingly struck off and sold to said bidder the following described real estate:

Lots 22 and 23 in Owners Resubdivision, Unit Number 2, being a resubdivision of Lots "B", 11, 12, 13, 14, and 15 in Brookhill Park a Subdivision of Parts of Section 8 and 9, Township 44 North, Range 11, East of the Third Principal Meridian, according to the Plat of said resubdivision recorded October 21, 1941, as Document 503652, in Book 28 of Plats, Page 62, in Lake County, Illinois.

Permanent Index Number: 11-08-201-061

Commonly known as: 111 Brookhill Rd., Libertyville, IL 60048

I, Sheriff of Lake County, do hereby report:

That the Sheriff of Lake County has executed and delivered to said bidder its Receipt(s) of Sale, copies of which are attached hereto, along with a copy of the Certificate of Sale (if any) delivered to said bidder.

That, upon confirmation of this sale, the Sheriff of Lake County, Illinois will execute and deliver a Sheriff's Deed to said bidder in accordance with said judgment and law.

Case No. 15-CH-2133

That the proceeds of said sale will, upon confirmation of the sale, be disbursed as follows:

To the plaintiff:

1. The amount due under judgment	\$ 364,409.14
2. Interest thereon from date of Judgment to date of sale	\$ 8,490.61
3. Post judgment advances and fees incurred:	
a) Taxes	\$ 3,526.27
b) Insurance	\$ 261.54
c) Property inspections	\$ 45.00
d) Publication costs	\$ 550.00
e) additional hearing	\$ 250.00
f) Post Judgment Foreclosure Attorney's Fees	\$ 260.00
 Total	 \$ 377,792.56
To the Selling Officer, as commission	\$ 600.00
 TOTAL AMOUNT DUE PLAINTIFF	 \$ 378,392.56
 TOTAL PROCEEDS OF SALE	 \$ 315,000.00
 DEFICIENCY	 \$ 63,392.56

Respectfully submitted,
Sheriff of Lake County

By John D. Idleburg
Sheriff
John D. Idleburg

Date: 8-6-19

Faiq Mihlar (#6274089)
HEAVNER, BEYERS & MIHLAR, LLC
Attorneys at Law
P.O. Box 740
Decatur, IL 62525

Send Notice/Pleadings to:
Veronika L. Jones (#6313161)
Email: Non-CookPleadings@hsbaltys.com
Telephone: (217) 422-1719
Facsimile: (217) 422-1754

IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

IN RE: Sheila Manwaring) CHAPTER 7
Robert Manwaring) CASE NUMBER: 19-BK-*27199*
Debtors) JUDGE: Hon A. Benjamin Goldgar
) TRUSTEE: *John Gierum*

AFFIDAVIT IN SUPPORT OF MOTION TO BE APPOINTED NEXT FRIEND

My name is Sheila Manwaring. I am a debtor in the above captioned Chapter 7 case. After being duly sworn, I do hereby declare under penalty of perjury the following:

- 1) I have been married to Robert Manwaring, joint debtor, for 59 years.
- 2) On June 23, 2015, while Robert was of sound mind, he executed powers of attorney for property and health conveying such authority to me. This Power of Attorney continues in force, unabated, and is valid as of the date of filing.
- 3) Since executing the Power of Attorney in 2015, Robert's neurological condition has deteriorated, significantly, and doctors have determined he is no longer able to manage or understand his affairs or financial issues.
- 4) My husband and I are in need of joint bankruptcy protection, in part due to accumulated consumer debt of \$34,403 but also a foreclosure deficiency pending of \$63,392.58. In that we are on fixed income and unable to pursue any other means of income, bankruptcy protection is the most appropriate action to take.
- 5) I retained Attorney Stephen S Newland of Newland and Newland, LLP, signing for myself and my husband under the POA, to prepare and file our petition and related documents.
- 6) I have handled all of our financial business in recent years, and am fully aware of all facets of our financial life, was able to address all questions, completed all forms and submitted documentation to our attorneys.
- 7) I am the best person to act on behalf of my husband in this matter and represent the best advocate for a Next-Friend designation.

8) After reviewing the petition, schedules and forms, I executed signatures for myself and for Robert Manwaring under the Power of Attorney executed June 23, 2015.

Further affiant stateth naught.

Submitted this 25th day of September, 2019.

S. M. manwaring
Sheila Manwaring
Debtor/Affiant

STATE OF ILLINOIS
COUNTY OF LAKE

Sworn to and subscribed before me this 25th day of September, 2019


Notary Public
My Commission Expires: _____


OFFICIAL SEAL
STEPHEN S NEWLAND
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 04/25/22